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May 10, 2017

**By Electronic Filing**

Marlene H. Dortch, Secretary  
Federal Communications Commission  
445 Twelfth Street, S.W.  
Washington, D.C. 20554

Re: *Rural Health Care Support Mechanism, WC Docket No. 02-60;  
Actions to Accelerate Adoption and Accessibility of Broadband-Enabled  
Health Care Solutions and Advanced Technologies, GN Docket No 16-46*

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Dear Ms. Dortch:

On May 8, 2017, Anand Vadapalli, President and Chief Executive Officer of Alaska Communications, and the undersigned met in separate meetings with Chairman Pai and his Wireline Advisor, Dr. Jay Schwartz; and Commissioner O’Rielly and his Legal Advisor, Amy Bender.

We explained that rural health care providers require Ethernet and similar packet-switched communications services to deliver modern health care services and to remain compliant with patient confidentiality and security demands of today’s cloud-based data platforms. The rural health care (“RHC”) universal service support mechanism’s Telecommunications Program is essential to enable Alaska’s health care providers to afford the high cost of these vital communications services in rural and remote parts of Alaska. These services – and RHC support – are necessary to support the missions of these health care providers and the needs of their patients.

Prorated funding commitments for Funding Year 2016, which were imposed because demand exceeded the current funding cap on the RHC support mechanism, have caused hardships for rural health care providers in Alaska. Those providers now face great difficulty in maintaining service levels because they were unable to plan for the funding shortfall in their current annual budgets. We urged the Commission to consider opportunities to increase the funding available for the RHC support mechanism, and to promote greater transparency with respect to the status and timing of the Universal Service Administrative Corporation’s review of funding requests.

At the same time, we urged the Commission to modernize the rules governing the Telecommunications Program. The core of those rules was written two decades ago for a world of low-bandwidth, circuit-switched services. Increasingly, the rules do not provide a meaningful framework within which health care providers can confidently seek support for modern, Ethernet-based services.

Please direct any questions regarding this matter to me.

Very truly yours,

Richard R. Cameron  
*for Alaska Communications*

cc: Jay Schwartz  
Amy Bender